

DO NOT WRITE IN THIS SPACE

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

Incident Report

Y N

Investigation Completed

X

Revised

Y N

Investigation Made at Scene

X

Fatality

X

Photographs

X

Hit and Run

X

(1) Reporting Agency OKLAHOMA HIGHWAY PATROL				Case Number (Agency Use) 21-007675				Motor Vehicles Involved 02		Number Injured 00		Number Killed 00			
(2) Date of Collision (mm/dd/yyyy) 04/05/2021		Time 2215		County Number and Name 58 OTTAWA		Nearest City or Town Number and Name In 00 MIAMI Near X 00									
(3) Distance from Nearest City or Town Limits MI 0009 FL 00				Control # 00		Int ID 00		Location 00		East Grid 033		North Grid 034			
(4) Street, Road or Highway I-44 (WILL ROGERS TURNPIKE)				Distance from 0006		(Nearest) Intersecting Street, Road or Highway TPU 81.66									
(5) Unit 01		Occupants 01		Type D		Last Name SINGH		First AMANDEEP		Middle		Suffix			
(6) Address 410 REMINGTON PT		City GREENWOOD		State IN		Zip 46143		Telephone (Use Area Code) (317)431-8907							
(7) Driver License Number 9370590926				State IN		Class A		Endorsement(s)		Restriction(s)		Inj. Sev. 1			
(8) Ejected 1				Extricated 1		Test 0		(% BAC) 5		Transported by 0		To Medical Facility			
(9) VIN 3AKJGLD54GSGT0183				Vehicle Year 2016		Color WHI		2nd Color 0		Make FRHT		Model CENT			
(10) Insurance Company Name CONTINENTAL INS SOLUTIONS				Policy Number FLCA192600153		Insurance Telephone (Use Area Code) (317)480-0159									
(11) Vehicle Removed by SANTA FE WRECKER				Owner's Last Name Same as Driver		First		Middle		Suffix		Date of Birth (mm/dd/yyyy)			
(12) Owner's Address				City		State		Zip		Towed Veh. Type Oversized Load 0		Rollover 0			
(13) Citation Number N229697				Statute/Ordinance Number 47.11-901		Citation Number		Statute/Ordinance Number							
(14) Unit 02		Occupants 01		Type D		Last Name HAYWARD		First ALEC		Middle STONE		Suffix			
(15) Address 1006 CANBRIDGE		City COMMERCE		State OK		Zip 74354		Telephone (Use Area Code) (918)533-7444							
(16) Driver License Number F083619235				State OK		Class D		Endorsement(s)		Restriction(s)		Inj. Sev. 1			
(17) Ejected 1				Extricated 1		Test 0		(% BAC) 5		Transported by 0		To Medical Facility			
(18) VIN 1FVABPBW91HH55621				Vehicle Year 2001		Color WHI		2nd Color 0		Make FRGT		Model CENT			
(19) Insurance Company Name NATIONAL LIABILITY				Policy Number 73TRR247126		Insurance Telephone (Use Area Code) (800)356-5750									
(20) Vehicle Removed by GARNERS WRECKER				Owner's Last Name Same as Driver		First		Middle		Suffix		Date of Birth (mm/dd/yyyy)			
(21) Owner's Address				City		State		Zip		Towed Veh. Type Oversized Load 0		Rollover 0			
(22) Citation Number				Statute/Ordinance Number		Citation Number		Statute/Ordinance Number							
(23) Investigating Officer C Rohr				Badge Number 344		Trp/Div. Assigned XA		Trp/Div. Location XA		Reviewer (InL) TWG		Reviewer Badge Number 83			
(24) Date of Report (mm/dd/yyyy) 04/06/2021															
Unit Type				Injury Severity				Type of Injury				Driver/Pedestrian Condition			
0 Driver 1 Pedestrian 2 Conveyance 3 Bicyclist				0 Not Applicable 1 No Injury 2 Possible 3 Non-Incapacitating 4 Incapacitating 5 Fatal 6 Unknown				0 N/A 1 Head 2 Trunk 3 External 4 Internal 5 Unknown				00 Not Applicable 01 Apparently Normal 02 Drinking - Ability Impaired 03 Odor of Alcohol/Beverage 04 Illegal Drugs 05 Under the Influence of Medications 06 Drugged 07 Drowsy/Fatigued 08 Emotional 09 Other 10 Unknown			
Occupant Protection (OP) in Use				00 Not Applicable 01 None Used 02 Lap Belt Only 03 Shoulder Belt Only 04 Shoulder and Lap Belt				05 Child Restraint Type Unknown 06 Restraint Used - Type Unknown 07 Helmet 08 Child Restraint - Forward Facing 09 Child Restraint - Rear Facing				10 Booster Seat 11 Other 12 Unknown			
Air Bag Deployed				Ejected				Extricated				Chemical Test			
0 Not Applicable 1 Deployed - Front 2 Deployed - Side 3 Deployed - Other (knee, air belt, etc.) 4 Deployment Unknown				0 Not Applicable 1 Not Ejected 2 Ejected 3 Ejected - Partially				0 N/A 1 No 2 Yes				0 N/A 1 Blood 2 Breath 3 Blood/Breath			
Extent of Damage				Insurance Verification				Oversized Load				Towed Vehicle Type			
0 N/A 1 None 2 Minor 3 Functional 4 Disabling 5 Unknown				0 N/A 1 No 2 Operator 3 Exempt 4 Owner				0 N/A 1 Not Permitted 2 Permitted				00 N/A 01 Boat Trailer 02 House Trailer 03 Farm Trailer 04 Horse Trailer 05 Another Vehicle 06 Utility Trailer 07 Homemade Trailer 08 Box Trailer 09 Stock Trailer 10 Camping Trailer 11 Combination 12 Other 13 Unknown			

WARNING - STATE LAW

Use of contents for commercial solicitation is unlawful

DPS: 0192-01 REV 0107

EXHIBIT 1

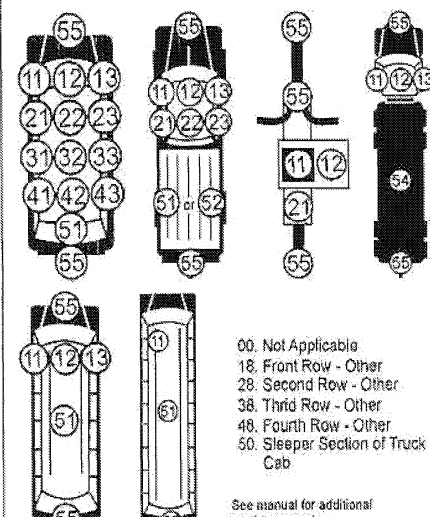
Case Number 21-007675

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(24) Unit	Injured <input type="checkbox"/> Passenger <input type="checkbox"/> Witness <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(25) Address	City		State		Zip	Telephone (Use Area Code)		
(26) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(27) Unit	Injured <input type="checkbox"/> Passenger <input type="checkbox"/> Witness <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(28) Address	City		State		Zip	Telephone (Use Area Code)		
(29) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(30) Unit	Injured <input type="checkbox"/> Passenger <input type="checkbox"/> Witness <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(31) Address	City		State		Zip	Telephone (Use Area Code)		
(32) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	
(33) Unit	Injured <input type="checkbox"/> Passenger <input type="checkbox"/> Witness <input type="checkbox"/> Prop. Owner <input type="checkbox"/>	Pos in Veh.	Last Name	First	Middle	Suffix	DOB(mm/dd/yyyy)	Sex
(34) Address	City		State		Zip	Telephone (Use Area Code)		
(35) Injury Severity / Type	OP Use	Air Bag	Ejected	Extricated	Transported by	To Medical Facility	Property Type	

Complete information below if this vehicle is being used for COMMERCE/BUSINESS and has a GVWR/GCWR IN EXCESS OF 10,000 LBS., or has a HAZMAT PLACARD, or is a BUS WITH SEATING FOR NINE OR MORE INCLUDING THE DRIVER

(36) Unit	Carrier Name	Address	
01	SMART FUTURE EXPRESS	3165 W SHIELDS	
(37) City	State	Zip	GVWR <input type="checkbox"/> 0 - 10K lbs. <input type="checkbox"/> 10,001 - 25K lbs. <input checked="" type="checkbox"/> 26K+ lbs. <input type="checkbox"/> Axle Qty. <input type="checkbox"/> 05 <input type="checkbox"/> 03 <input type="checkbox"/> Cargo Body <input type="checkbox"/> Vehicle Use <input checked="" type="checkbox"/> Interstate Commerce <input type="checkbox"/> Intrastate Commerce <input type="checkbox"/> Other Non-Commercial <input type="checkbox"/> Government <input type="checkbox"/>
FRESNO	CA	93722	
(38) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class
3219331	OK		
(39) Unit	Carrier Name	Address	
02	COLLINS WRECKER	320 S MAIN	
(40) City	State	Zip	GVWR <input checked="" type="checkbox"/> 0 - 10K lbs. <input type="checkbox"/> 10,001 - 25K lbs. <input checked="" type="checkbox"/> 26K+ lbs. <input type="checkbox"/> Axle Qty. <input type="checkbox"/> 03 <input type="checkbox"/> 00 <input type="checkbox"/> Cargo Body <input type="checkbox"/> Vehicle Use <input checked="" type="checkbox"/> Interstate Commerce <input type="checkbox"/> Intrastate Commerce <input type="checkbox"/> Other Non-Commercial <input type="checkbox"/> Government <input type="checkbox"/>
COMMERCE	OK	74339	
(41) U.S. DOT Number	NASI Report Number	Placard Number	Haz. Mat. Class
3304262	OK		

Position in Vehicle 	Vehicle Configuration 00. N/A 01. Passenger Veh.-2 Dr 02. Passenger Veh.-4 Dr 03. Passenger Veh. Conv. 04. Pickup 05. Single Unit Truck, 2 axles 06. Single Unit Truck, 3+ axles 07. School Bus 08. Truck/Trailer 09. Truck-Tractor (Bobtail) 10. Truck-Tractor/Semi-Trailer 11. Truck-Tractor/Double 12. Truck-Tractor/Triples 13. Bus/Large Van 9-15 occupants including driver 14. Bus 16+ occupants including driver 15. Motorcycle 16. Motor Scooter/Moped 17. Motor Home 18. Farm Machinery 19. ATV 20. SUV 21. Passenger Van 22. Truck more than 10,000 lbs., Cannot Classify 23. Van 10,000 lbs. or Less 24. Other 99. Unknown	Cargo Body Type 00. N/A 01. Bus 9-15 seats 02. Bus 16+ seats 03. Van / Enclosed Box / Stock Trailer 04. Cargo Tank 05. Flatbed 06. Intermodal 07. Dump Truck/Trailer 08. Concrete Mixer 09. Auto Transporter 10. Garbage/Refuse 11. Hopper (grain/chips/gravel) 12. Pole Trailer 13. Log Trailer 14. Vehicle Towing Vehicle 15. Other 99. Unknown
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Case Number 21-007675

OFFICIAL OKLAHOMA TRAFFIC COLLISION REPORT

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Unit		Total Lanes in Roadway	Legal Speed	Pedestrian / Pedalcyclist Only				Was the collision in or near a construction, maintenance or utility work zone? (If yes, complete this section)			
Unit 1	Unit 2			Actions Prior to Collision	Location at Time of Collision	Safety Equip.	Unit Number of Vehicle Striking	Yes	No		
This unit will correspond to "Unit 1"	01	02	75						<input type="checkbox"/>		
This unit will correspond to "Unit 2"	02	02	75						<input checked="" type="checkbox"/>		
Light		2	What Vehicle Was Going to Do		Unit 1 Unit 2		Underride/Override		Unit 1 Unit 2		
1 Daylight			01		12						
2 Dark-Not Lighted			00 Not Applicable		01		0 Not Applicable				
3 Dark-Lighted			01 Go Ahead				1 No Underride or Override				
4 Dawn			02 Turn Left				2 Underride, Compartment Intrusion				
5 Dusk			03 Turn Right				3 Underride, No Compartment Intrusion				
6 Dark-Unknown Lighting			04 Make "U" Turn				4 Underride, Compartment Intrusion Unknown				
7 Other			05 Stop				5 Override, Motor Vehicle in Transport				
9 Unknown			06 Slow for Cause				6 Override, Other Motor Vehicle				
Weather		01	07 Start from Park/Stop				9 Unknown				
01 Clear			08 Change Lanes								
02 Fog/Smog/Smoke			09 Overtake								
03 Cloudy			10 Pass								
04 Rain			11 Back								
05 Snow			12 Remain Stopped								
06 Sleet/Hail (Freezing Rain/Drizzle)			13 Remain Parked								
07 Severe Crosswind			14 Enter/Merge in Traffic								
08 Blowing Snow			15 Negotiate a Curve								
09 Blowing Sand, Soil, Dirt			16 Park								
10 Other			17 Other								
99 Unknown			99 Unknown								
Locality		5	What Vehicle Did		Unit 1 Unit 2		Traffic Control		Unit 1 Unit 2		
1 Residential			01		12		00		00		
2 Business			00 Not Applicable				01 Stop Sign				
3 Industrial			01 Went Ahead				02 Traffic Signal				
4 School			02 Turned Left				03 Flashing Traffic Signal				
5 Not Built-up			03 Turned Right				04 School Zone Signs				
6 Mixed Use			04 Entered "U" Turn				05 Yield Sign				
7 Other			05 Stopped				06 Warning Sign				
9 Unknown			06 Slowed				07 Railroad Advance Warning Sign				
Type of Intersection		0	07 Started From Park/Stop				08 Railroad Cross Bucks				
0 Not an Intersection			08 Entered Other Lane				09 Railroad Gates				
2 Y-Intersection			09 Overtaking				10 Railroad Signal				
3 T-Intersection			10 Passing				11 No Passing Zone				
4 Four-Way Intersection			11 Backed				12 Person (including flagger, law enforcement, crossing guard, etc.)				
5 Five-Point or More Intersection as Part of Interchange			12 Remained Stopped				13 Abnormal Control				
6 Traffic Circle			13 Remained Parked				14 Other				
8 Roundabout			14 Entered/Merged				99 Unknown				
9 Unknown			15 Departed Rdwy-Right								
Incident Type		00	16 Departed Rdwy-Left				Road Surface Conditions		Unit 1 Unit 2		
00 Not an Incident			17 Swerved Right				01 Dry		01		
51 Private Property			18 Swerved Left				02 Wet				
52 Deliberate Intent			19 Parked				03 Ice/Frost				
53 Medical Condition			20 Other				04 Snow				
54 Legal Intervention			99 Unknown				05 Mud, Dirt, Gravel				
55 Suicide			Visibility Obscured by		Unit 1 Unit 2		06 Slush				
57 Drowning			00		00		07 Water (standing, moving)				
58 Other			01 Trees				08 Sand				
Location of First Harmful Event		01	02 Embankment				09 Oil				
01 On Roadway			03 Building				10 Other				
02 Shoulder			04 Signs				99 Unknown				
03 Median			05 Parked Vehicles								
04 Roadside			06 High Weeds				Road Character		Unit 1 Unit 2		
05 Gore			07 Fences				Grade		Unit 1 Unit 2		
06 Separator			08 Shrubbery				1 Level		1		
07 Parking Lane/Zone			09 Ice, Snow or Frost on Windows				2 Hillcrest				
08 Off Roadway, Location Unknown			10 Smoke				3 Uphill				
09 Outside Right-of-Way			11 Fog				4 Downhill				
10 Other			12 Dust				5 Sag (bottom)				
99 Unknown			13 Rain								
Driver Distracted by		Unit 1 Unit 2	14 Sun				Road Alignment		Unit 1 Unit 2		
0 Not Applicable/None		9 0	15 Other				1 Straight		1		
1 Electronic Communication Devices			99 Unknown				2 Curve - Left				
2 Other Electronic Device							3 Curve - Right				
3 Other Inside Vehicle											
4 Other Outside Vehicle							Road Surface Type		Unit 1 Unit 2		
9 Unknown							1 Concrete		2		
							2 Asphalt				
							3 Gravel				
							4 Dirt				
							5 Brick				
							6 Other				
							9 Unknown				
Type of Work Zone		Location of the Work Zone Collision		Workers Present		Yes		No		Unknown	
1 Lane Closure		1 Before the First Work Zone Warning Sign		Yes							
2 Lane Shift/Crossover		2 Advance Warning Area		No							
3 Work on Shoulder or Median		3 Transition Area		Unknown							
4 Intermittent or Moving Work		4 Activity Area									
9 Unknown		5 Termination Area									
		9 Unknown									
Trafficway		Unit 1 Unit 2		Unsafe / Unlawful Contributing Factors		Unit 1 Unit 2					
0 Not Applicable		4 4		73 98							
1 One Way				FAILED TO YIELD							
2 Two-Way - Not Divided				01 From Stop Sign							
3 Two-Way - Divided				02 From Yield Sign							
4 Two-Way - Divided - Positive Median Barrier				03 Private Drive							
5 Turn Lane				04 County Road at Through Highway							
6 Ramp / Loop				05 From Signal Light							
7 Driveway				06 From Alley							
8 Alley / Parking Lot				07 To Pedestrian							
9 Unknown				08 To Vehicle on Right							
				09 To Vehicle in Intersection							
				10 To Emergency Vehicles							
				12 Other							
				13 Human Element							
				14 Traffic Condition							
				15 Weather Condition							
				16 Driver's Ability (Aged)							
				17 Inexperienced Driver - Young							
				18 Exceeding Legal Limit							
				19 For Traffic Conditions							
				20 For Type of Roadway (Gravel, Dirt, etc.)							
				21 For Ice or Snow on Roadway							
				22 Rain or Wet Roadway							
				23 Wind							
				24 Other Weather Conditions							
				25 Vehicle Condition							
				26 View Obstruction							
				27 On Curve/Turn							
				28 Impeding Traffic							
				29 Other							
				30 From Wrong Lane							
				31 From Direct Course							
				32 Right							
				33 Left							
				34 Turn About/U-Turn							
				35 To Enter Private Drive							
				36 In Front of Oncoming Traffic							
				37 Other							
				38 CHANGED LANES UNSAFELY							
				39 STOPPED IN TRAFFIC LANE							
				40 For Stop Sign							
				41 For Traffic Signal							
				42 For School Bus							
				43 For Railroad Gates/Signal							
				44 For Officer/Flagman							
				45 At Sidewalk/Stopline							
				46 Other							
				47 Brakes							
				48 Steering							
				49 Tires							
				50 Suspension							
				51 Headlights							
				52 Tail Lights							
				53 Stop Lights							
				54 Wheel							
				55 Exhaust System							
				56 Windshield Wipers							
				57 Other Mechanical Defects							
				58 In Meeting							
				59 No Passing Zone (Unmarked)							
				60 Marked Zone							
				61 Other							
				62 In Marked Zone							
				63 On Hill/Curve							
				64 At Intersection							
				65 Without Sufficient Clearance							
				66 Other							
				67 On Roadway							
				68 Where Prohibited							
				69 Other							
				70 Distracted by Passenger in Vehicle							
				71 Other Distraction Inside Vehicle							
				72 Distraction From Outside Vehicle							
				73 Other							
				74 On One Way							
				75 On Exit Ramp							
				76 On Entrance Ramp							
				77 Other							
				78 Parked Position							
				79 Other							
				80 ALCOHOL/DUI/DWI							
				81 DRUG/DUI							
				82 Failed to Signal							
				83 Disregarded Warning Signal							
				84 Improper Use of Lane							
				85 Improper Backing							
				86 Apparently Sleepy							
				87 Failed to Secure Load							
				88 Other/Unknown							
				89 Deer in Roadway							
				90 Animal in Roadway							
				91 Domestic Animal in Rdwy							
				92 Avoiding Other Vehicle							
				93 Avoiding Pedestrian							
				94 Object/Debris in Roadway							
				95 Defect in Roadway							
				96 Abnormal Traffic Control							
				97 Improper Bicyclist Action							
				98 NO IMPROPER ACTION BY DRIVER							
				99 PEDESTRIAN ACTION							
Point of First Contact on Vehicle		Unit 1 Unit 2		Most Damaged Area		Unit 1 Unit 2					
11 07				11 07							

Case Number 21-007675

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Latitude

36.9278

N

Longitude

-94.7366

W

Railroad Crossing Number

Roadway Orientation

Unit Number

01

NE SW

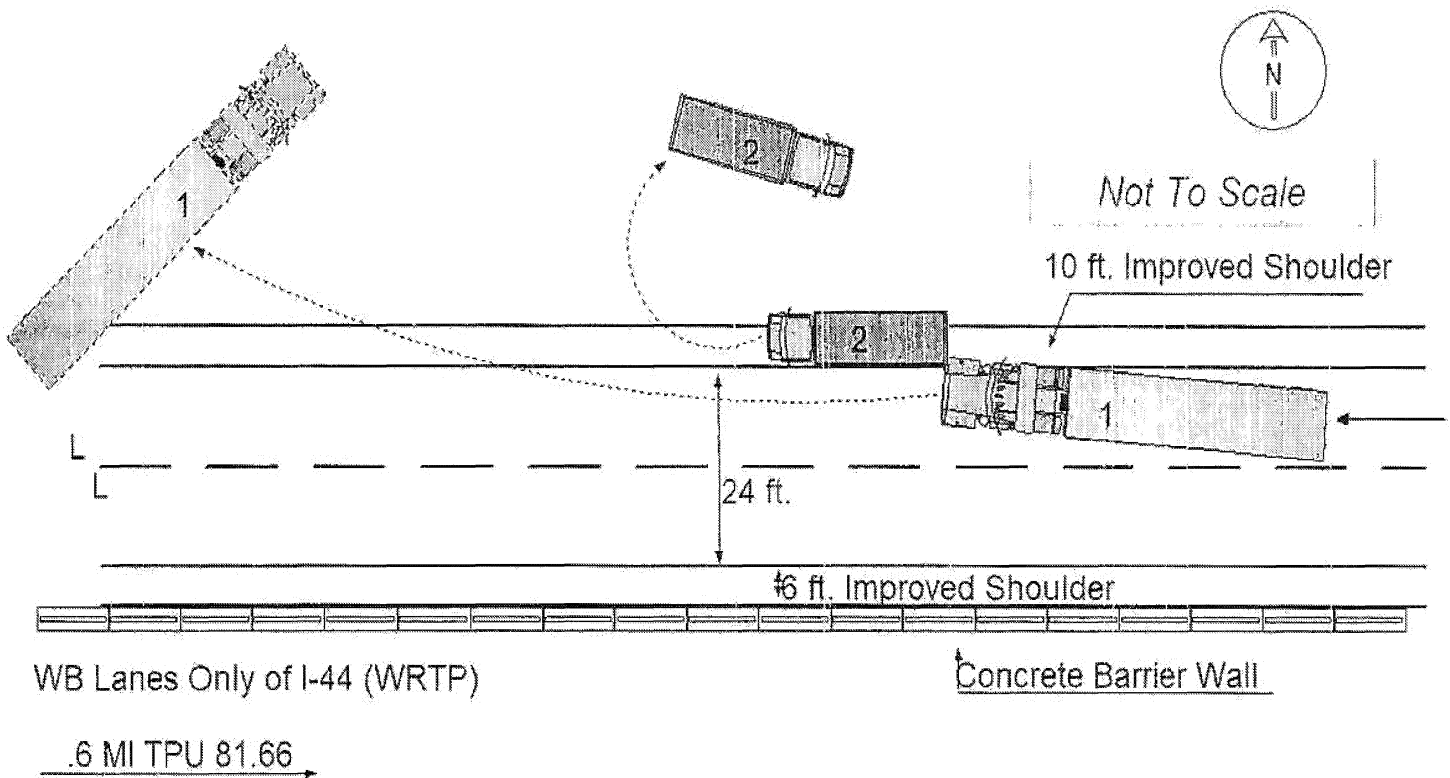
W

Unit Number

02

NE SW

W



COLLISION EVENTS

Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	First Harmful Event for the Entire Collision
01	34	17	00	00	17	
Unit	First Event	Second Event	Third Event	Fourth Event	Most Harmful Event	
02	35	00	00	00	35	34

- 00 Not Applicable
 10 Overturn/Rollover
 11 Fire/Explosion
 12 Immersion
 13 Jackknife
 14 Cargo/Equipment Loss or Shift
 15 Equipment Failure (Blown Tire, Brake Failure, etc.)
 16 Separation of Units
 17 Departed Road Right
 18 Departed Road Left
 19 Cross Median/Centerline
 20 Downhill Runaway

- 21 Fell/Jumped From Motor Vehicle
 22 Thrown Or Falling Object
 23 Other Non-Collision
PERSON, MOTOR VEHICLE, OR NON-FIXED OBJECT:
 30 Pedestrian
 31 Pedal Cycle
 32 Railway Vehicle (train, engine)
 33 Animal
 34 Motor Vehicle in Transport
 35 Parked Motor Vehicle
 36 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle

- 37 Work Zone/Maintenance Equipment
 38 Other Non-Fixed Object
FIXED OBJECT:
 40 Barrier (Cable)
 41 Barrier (Concrete)
 42 Barrier (Other)
 43 Fence Pole
 44 Fence
 45 Traffic Signal Support
 46 Traffic Sign Support
 47 Utility Pole/Light Support
 48 Other Post/Pole/Support
 49 Guardrail/Guardrail Face
 50 Guardrail End
 51 Culvert
 52 Curb
 53 Island
 54 Sand Barrels
 55 Impact Attenuator/ Crash Cushion
 56 Pavement Drop-Off
 57 Ditch
 58 Embankment
 59 Tree (Standing)
 60 Dividing Strip
 61 Retaining Wall
 62 Bridge Abutment
 63 Bridge Pier or Support
 64 Bridge Rail
 65 Bridge Post
 66 Bridge Curb
 67 Bridge Super Structure (Beams)
 68 Bridge Overhead Structure
 69 Delineator
 70 Mailbox
 71 Other Fixed Object
 72 Other Highway Structure
 73 Ground
 99 Unknown

Remarks

ALL MEASUREMENTS ARE APPROXIMATE. UNIT 1 WAS WB ON I-44 IN THE OUTSIDE LANE. UNIT 2 WAS A LEGALLY PARKED TOW TRUCK, PARKED ON THE WB SHOULDER OF I-44, ASSISTING A BROKEN DOWN MOTORIST. UNIT 1 WAS INNATENTIVE AND LEFT THE ROADWAY RIGHT STRIKING THE REAR LEFT OF UNIT 2 WITH IT'S FRONT RIGHT. THERE WERE NO SKIDMARKS BEFORE OR AFTER IMPACT. AOI WAS 1 FT. NORTH EDGE OF THE WB LANES OF I-44 AND .6 MI EAST OF THE EAST EDGE OF TPU 81.66. AOR FOR UNIT 1 WAS 42 FT NW OF THE AOI. AOR FOR UNIT 1 WAS 133 FT. NW OF AOI.

This report is based on the officer's investigation of this collision. This report may contain the opinion of the officer.



DPS: 0192-04 REV 0107

OKLAHOMA HIGHWAY PATROL OKLAHOMA UNIFORM VIOLATIONS COMPLAINT

IN THE DISTRICT COURT OF OTTAWA COUNTY
STATE OF OKLAHOMA

SUMMONS

On or about (date) 04/06/2021	at (24-hour time) 2215	County Number	58
at or near (location) I-44 / MM 322 WB			
Name (last, first middle) SINGH, AMANDEEP		Phone Number	
Address 410 REMINGTON			
City GREENWOOD		State IN	Zip Code 46143
Birthdate 07/10/1990	Ht. 511	Wt. 190	Race W
Sex M	Class A	Endorsements	
Driver License Number 9370590926	Withdrawal <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Month/Year 07/2025	State IN
Employer SMART FUTURE CMV	Did Unlawfully	Operate <input checked="" type="checkbox"/>	Park <input type="checkbox"/>
Make FRHT	Year 2016	Style SEMI	Color WHI
Tag XP36115	Year 2021	State CA	
CMV <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	CDL <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	HazMat Placard Present or Required	Accident: <input type="checkbox"/> PD <input type="checkbox"/> PI <input type="checkbox"/> FATALITY

Instructions to the Violator

You must either enter a plea or appear in court at the designated time. To enter a plea, place a check mark in one of the boxes on each charge indicating Guilty or Nolo Contendere and submit payment to the court for the total amount(s) owed.

If you do not enter a plea to any of the charges below, you must appear in court at the prescribed date and time, or any subsequent dates and times as set by the court. Failure to appear at arraignment or failure to submit the appropriate bond for each charge may result in the following:

1. Suspension of your driving privileges in Oklahoma and in your home state pursuant to the Nonresident Violator Compact;
2. Your driving privileges will remain suspended until all outstanding court obligations and conditions for reinstatement have been met; and
3. Issuance of a warrant for your arrest.

DPS Citation Number N229697	<input type="checkbox"/> Guilty <input type="checkbox"/> Nolo Contendere	(DPS USE) IN1
SPEEDING MPH in MPH Zone <input type="checkbox"/> Pace Radar Plane Other <input type="checkbox"/>		
Violation Description INATTENTIVE DRIVING RESULTING IN COLLISION		
Contrary to Title <u>T47</u> O.S., Section <u>11-901b</u>		
Minimum Fine and Costs \$249.00		
Officer's Remarks: XA-07675-21		

Electronic Signature AMANDEEP SINGH

OKLAHOMA HIGHWAY PATROL



Case Number: 21-007675
CollisionDate: 04/05/2021 22:15
Trooper: ROHR #344
Location: I-44 (WILL ROGERS TURNPIKE)
At or Near: SPRING RIVER
City and County: MIAMI, OTTAWA

Name: SINGH, AMANDEEP
License Number: 9370590926
DOB: 07/10/1990
Phone Number: 3174318907
Address Street: 410 REMINGTON PT
City: GREENWOOD State: IN ZIP: 46143
Insurance Company: CONTINENTAL INS SOLUTIONS
Insurance Phone: 3174800159
Policy Number: FLCA192600153
Vehicle Make: FRHT Model: CENT Year: 2016
VIN: 3AKJGLD54GSGT0183
Tag Number: XP36115 Tag State: CA
Owner Name: SMART FUTURE EXPRESS
Owner License Number:
Owner Street: 3165 W SHIELDS
Owner City: FRESNO State: CA ZIP: 93722

Name: HAYWARD, ALEC STONE
License Number: F083619235
DOB: 06/10/1998
Phone Number: 9185337444
Address Street: 1006 CANBRIDGE
City: COMMERCE State: OK ZIP: 74354
Insurance Company: NATIONAL LIABILITY
Insurance Phone: 8003565750
Policy Number: 73TRR247126
Vehicle Make: FRGT Model: CENT Year: 2001
VIN: 1FVABPBW91HH55621
Tag Number: W28134 Tag State: OK
Owner Name: COLLINS WRECKER
Owner License Number:
Owner Street: 320 S MAIN
Owner City: COMMERCE State: OK ZIP: 74339

If you find the other driver was not insured at the time of the above referenced collision, you may complete an Oklahoma Motor Vehicle Collision Report and submit the same within 1 year of the collision to:

DPS - Driver Compliance Division
P.O. Box 11415

Oklahoma City, OK 73136-0415

Call 405-425-2098 or visit www.dps.state.ok.us with questions.